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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)
#1342 Dec Suppl 12/1/01

As a below named inventor, I hereby declare that:
 My residence, mailing address and citizenship are stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5912,434 granted June 15, 1999, and for which a reissue patent is sought on the invention entitled Kenny Clamp

the specification of which

- is attached hereto.
- was filed on 07/12/00 as reissue application number 09 / 614,707
and was amended on 09/03/01
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verify believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

- by reason of a defective specification or drawing.
- by reason of the patentee claiming more or less than he had the right to claim in the patent.
- by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening.
 Applicant believes the original patent to be partly inoperative or invalid by reason of the patentee claiming more or less than the patentee had a right to claim in the patent.

Applicant believes that there was error in that claim one defined his invention too narrowly. For example, patentee claimed the sleeve in the form of a funnel having a bifurcated narrow end, and a wider upper end, although other structures such as the cylinder now claimed in claims 7-10 were permissible. Basis for these claims can be found in figures 2 and 3 of the specification under Detailed Description of the Invention.

All errors that are being corrected in the reissue application up to the time of the filing of the oath/declaration arose without any deceptive intention on the part of the applicant.

The Reissue oath fully complies with CFR 1.63.

In accordance with MPEP 1416 applicant offers to surrender the original patent.

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Burden Hour Statement: This form is estimated to take 0.6 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

#1342 Dec Suppl 12/1/01

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PAGE 001
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Attn: Mr. L.A. Ball
703 746 - 3459

MANUAL OF PATENT EXAMINING PROCEDURE

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<small>Under the Patent Protection Act of 1995 no person is entitled to a patent or to a certificate of registration unless he or she has filed a true oath or affirmation.</small>		<small>Approved for use through 04/30/2001. GUM 0501-0033 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Gum 0501-0033</small>
(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)		<small>Patent Number (Optional)</small>
<p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.</p>		
<p>Name(s) _____ <small>Registration Number</small> <small>REG. 30 572</small></p>		
<p>Correspondence Address: Direct all communications about the application to: <input type="checkbox"/> Customer Number _____ Place Customer Number Bar Code Label here <small>Type Customer Number here</small></p>		
<p>Firm or Individual Name: Robert Hailey <small>Address: BJR Gilverton Blvd</small></p>		
<p>Address: _____ <small>City: BETHESDA State: MD Zip: 20705</small></p>		
<p>Country: USA <small>Telephone: 301-572-2059 Fax: 301-672-4719</small></p>		
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like are made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon, or any patent to which this declaration is directed.</p>		
<p>Full name of sole or first inventor (given name, family name) <small>Wayne Harrison Robinson</small></p>		
<p>Inventor's signature: Wayne H. Robinson Date: 11-21-2001 <small>Residence: 671 TETON Drive, Lothian md.</small></p>		
<p>Citizenship: USA</p>		
<p>Mailing Address: 671 TETON Dr, Lothian md.</p>		
<p>Full name of second joint inventor (given name, family name)</p>		
<p>Inventor's signature _____ Date _____ <small>Residence _____ Citizenship _____</small></p>		
<p>Mailing Address _____</p>		
<p>Full name of third joint inventor (given name, family name)</p>		
<p>Inventor's signature _____ Date _____ <small>Residence _____ Citizenship _____</small></p>		
<p>Mailing Address _____</p>		
<p><input type="checkbox"/> Additional joint inventors are named on separately numbered sheets attached hereto. <small>[Page 2 of 2]</small></p>		